APPENDIX D DISCHARGE MONITORING REPORTS

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MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH DISCHARGE MONITORING REPORT FOR STORM WATER AND WASTE WATER DISCHARGES UNDER GENERAL PERMIT

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PART I: FACI	LITY INFO	ORMATION									825	
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PART II: MON	ITORING	INFORMATION										
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PART III: ANAI		RESULTS										
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SIGNATURE OF INDIVID											PHONE NUMBER	628.2001
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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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		ORMATION					COUNTY				PERMIT #		
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SIGNATURE OF INDIV	IDUAL PREPAI	RING REPORT		that	•					1	PHONE NUMBER	628-Ze	>&\
REPORT APPROVED	BY OWNER			7.0V		PHON	NE NUMBER				DATE		
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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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PART II: MON	ITORING	INFORMATION										
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REPORT APPROVED 6	Y OWNER					PHONI	E NUMBER		9		DATE	
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MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH DISCHARGE MONITORING REPORT FOR STORM WATER AND WASTE WATER DISCHARGES UNDER GENERAL PERMIT

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MISSOURI DEPARTMENT OF NATURAL RESOURCES WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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	LITY INFO	ORMATION									I ment to t	
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MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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SAMPLES COLLECTED BY	GINFORMATION	F	PHONE NUMBER			NUMBER OF SAI	IPLES	Dischar	ľ	(NAME AND ADDRESS)
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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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NAME OF INDIVIDUAL PREPARING REPORT (PLEASE TYPE OR PRINT)

SIGNATURE OF INDIVIDUAL PREPARING REPORT

AND TROPORT (APPROVED BY OWNER)

MO 780-1560 (7-04)

FIRM Saint Louis Composting

PHONE NUMBER

BEPORT (PLEASE TYPE OR PRINT)

PHONE NUMBER

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BY 100 (7-04)

DATE 9/9/2015

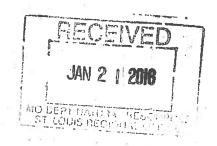


39 Old Elam Avenue Valley Park, MO 63088 Office: 636-861-3344 Fax: 636-861-5925 www.stlcompost.com

January 21, 2016

Missouri Department of Natural Resources Saint Louis Regional Office 7545 S. Lindbergh Blvd.; Suite 210 Saint Louis, MO 63125

Saint Louis Composting, Inc. NPDES Permit MOG970035 4th Discharge Monitoring Report



Dear Sir or Madam:

Please see the attached 4th quarter discharge monitoring report for NPDES permit number MOG970035. The reporting period is October 2015 – December 2015.

If you have any questions regarding the attached information, please contact me at 636-861-3344 or at pgeraty@stlcompost.com

Sincerely,

Patrick Geraty President

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MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

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PART I: FACI	LITY INFO	ORMATION									
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PART III: ANA											
OUTFAL		001		002		003		1741		SAMPLE	ANALYTICAL METHOD
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SAMPLE COLL	LECTION		ANALYSIS		ANALYSIS DATE		ANALYSIS		ANALYSIS		
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				Jenny	Law	er	U.		Sain	Louis	(composting)
SIGNATURE OF INDIVI	DUAL PREPAR	ING REPORT	()	M www.	2			<u></u>	a	PHONE NUMBER	6-86]-33440
REPORT APPROVED B	BY OWNER	3		1	THE CALL	PHONE	36 - 861	- 38th	<u> </u>	DATE 1/18	12016
MO 780-1580 (7-04)		200					- 3 301		,	/ / / /	



39 Old Elam Avenue Vailey Park, MO 63088 Office: 636-861-3344 Fax: 636-861-5925 www.stlcompost.com

April 15, 2016

Ms. Sandy Schoen Missouri Department of Natural Resources Saint Louis Regional Office 7545 S. Lindbergh Blvd.; Suite 210 Saint Louis, MO 63125

RE: Saint Louis Composting, Inc.

NPDES Permit MOG970035

1st Quarter 2016 Discharge Monitoring Report

Dear Ms. Schoen:

Please see the attached 1st quarter discharge monitoring report for NPDES permit number MOG970035. The reporting period is January 2016 – March 2016. Floodwaters resulting from a rain event that occurred around December 30, 2015 did encroach onto the property around the ditch line areas. When authorities allowed access to our facility, the floodwaters had already receded off of the property. No further discharging of stormwater and/or floodwater occurred following the December 30, 2015 rain event.

If you have any questions regarding the enclosed information, please contact me at 636-861-3344 or at pgeraty@stlcompost.com.

Sincerely,

Patrick Geraty President

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WATER PROTECTION PROGRAM - WATER POLLUTION BRANCH

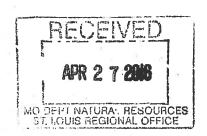
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PART I: FACI	LITY INFO	PMA	TION						-:			PERMIT #	
CAON ITH MARKE					-	4.1./ 15	30 V	COUNTY		4 .		MO-697	706.35
Sit	· Lou	15_	Compos	stina	, Lnc	: Valley	Park	St. Lo.	MS C	curity		MO C	700 22
PART II: MON	ITORING	INFO	RMATION				·	NUMBER OF SAME	1 EC			LABORATORY (NAME AND ADDRESS)
SAMPLES COLLECTED				I .	HONE NUMBER	636-861-3	1415	NUMBER OF SAME		-ND			b,Inc.
	Denn	ìs	Lawler	·		6 -10 0 - 5	7377	ANALYSIS PERFOR			RPRINT	5445	Horse shoe Lake Rd.
St. Louis	Compost	ring,	Inc.; 39	old E	Elam Av	e, Valley Park	M0 Læ8						ville, IL 62234
PART III: ANA	LYTICAL	RESL	ILTS								Т	SAMPLE	ANALYTICAL METHOD
OUTFALI			001		002	2	DATE 003		DATE			TYPE	AMAZI HOME IIIZI
DATE AND TI SAMPLE COLL	ME OF ECTION	DATE		ANALYSIS DATE	DATE	ANALYSIS		ANALYSIS	TIME		ANALYSIS DATE	• • • • • • • • • • • • • • • • • • • •	
Parameter	Unit	TIME		DATE	TIME		TIME		1 thre				
Rainfall Amount	in.												
Flow	MGD	N	D		ND								
рН	Units												
Settleable Solids	mL/L/hr		-										
Oil & Grease	mg/L						<u> </u>						
Other (list)											-+		
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NAME OF INDIVIDUAL	PREPARING F	EPORT	(PLEASE TYPE O	PRINT)	T; CC.	au Finance				FIRM	. Loui	s Compo	sting, Inc. 036-861-3344
SIGNATURE OF INDIVI	DUAL PREPAR	ING RE	PORT			ny Emm				1	1	PHONE NUMBER	036-861-3344
			.7.7	Almy/	Summer!	·	DUONE	AU MARED				DATE A	/
REPORT APPROVED B	Y OWNER	_					C	NUMBER 36-86	334	4		DATE	2016
10 780-1580 (7-04)				}								. /	



39 Old Elam Avenue Valley Park, MO 63088 Office: 636-861-3344 Fax: 636-861-5925 www.stlcompost.com

April 27, 2016

Ms. Sandy Schoen Missouri Department of Natural Resources Saint Louis Regional Office 7545 S. Lindbergh Blvd.; Suite 210 Saint Louis, MO 63125



RE:

Saint Louis Composting, Inc. NPDES Permit MOG970035

1st Quarter 2016 Discharge Monitoring Report - Resubmittal

Dear Ms. Schoen:

Please disregard the 1st Quarter Discharge Monitoring Report (DMR) submitted on April 15, 2016. Please review the revised 1st quarter DMR in the new format with rainfall totals, which was received from you, for NPDES permit number MOG970035. The reporting period is January 2016 – March 2016. Floodwaters resulting from a rain event that occurred around December 30, 2015 did encroach onto the property around the ditch line areas. When authorities allowed access to our facility, the floodwaters had already receded off of the property. No further discharging of stormwater and/or floodwater occurred following the December 30, 2015 rain event.

Thank you for your assistance and guidance in regards to providing an updated electronic DMR form with data pages which replaces this facility's original DMR paper form. If you have any questions regarding the enclosed information, please contact me at 636-861-3344 or at pgeraty@stlcompost.com.

Sincerely

Patrick Geraty

President

Enc.

RETURN FORM TO: St. Louis Regional Office 7545 S. Lindbergh Blvd., Ste. 210 St. Louis, MO 63125

Facility Name	St. Louis Composting - Inc.	Current Address: Owner × Billing □	Address Change For: Owner Dilling D
Permit Number	#MO-G970035	39 Old Elam Avenue, Valley Park, MO 63088	
County	St. Louis County		
Facility Type SIGNATURE AND TYPLE OF AUTR	Yard Waste Composting operations under 20 acres HORIZED INDIVIDUAL IN ACCORDANCE WITH 10 CSR 20-6.010(2)(C) DATE 4/27/4-	PHONE NUMBER E-MAIL ADDRESS (Optional) 636-861-3344 Page 1	tw@sticomoost.com
COMMENTS:	BESICION 1/2-1/18		This report covers the period of:
			1/01/16 to 3/31/16

PERMIT LIMITATIONS AND MONITORING REQUIREMENTS Final Permit Limitations **Monkoring Requirement** Outfall #001 Weekly Monthly Daily Sample Type Due Date Frequency Units Parameter Ачегаде Average Maximum quarterly 24 hr estimate MGD Flow quarterly 30 grab 45 mg/L Biochemical Oxygen Demand quarterly 50 grab mg/L 100 **Total Suspended Solids** October 28th of quarterly grab .. SU each year pН MONTH OF JANUARY total daily inches Precipitation MONTH OF FEBRUARY total daily inches Precipitation MONTH OF MARCH total Precipitation

Outfall #	001			NO DISCHARGE	x
Parameter	Daily Minimum	Daily Maximum	Weekly Average	Monthly Average	
Flow					
Biochemical Oxygen Demand					
Total Suspended Solids			157		
př.ř.					
MONTH OF JANUARY Precipitation		0.75		0.046774194	
MONTH OF FEBRUARY Precipitation		0.5		0.09137931	
MONTH OF MARCH Precipitation		1.5		0.177419355	
					- 2

MONITORING REPORTS SHALL BE SUBMITTED QUARTERLY THE FIRST REPORT IS DUE APRIL 28, 2013.

IF A VIOLATION OCCURRED, PLRASE ATTACH THE FOLLOWING: AN EXPLANATION OF POSSIBLE CAUSE, EXACT DATE OF NON-COMPLIANCE, DATE ANTICIPATED TO RETURN TO COMPLIANCE, AND WHAT STEPS YOUR OPERATION WILL TAKE TO PREVENT A REOCCURRENCE OF THE VIOLATION.

- · Monitoring requirement only.
- ** pH is measured in pH units and is not to be averaged. The pH is limited to the range of 6.5 9.0 pH units.
- *** Sample discharge at least once for the mouths of: Jan, Feb, Mar-1st Quarter, Apr, May, Jun-2nd Quarter, Jul, Aug, Sep-3rd Quarter, Oct, Nov, Dec-4th Quarter.

Note 1 Monitor once/quarter during the first hour after a discharge from a rainfall event greater than 0.5 inch in a 24 hour period.

Report as "no-discharge" if a discharge does not occur during the monitoring period. Samples shall be collected at all outfalls.

AFR 2 7 200

MO DEPT NATURAL RESOURCES ST. LOUIS RECIONAL OFFICE THIS DMR EXPIRES ON: November 29, 2017

DMR Page 1 of

RETURN FORM TO: St. Louis Regional Office 7545 S. Lindbergh Blvd., Ste. 210 St. Louis, MO 63125

Facility Name	St. Louis Composting - Inc.	Current Address: Owner × Biling	Address Change For. Owner Billing
Permit Number	#MO-G970035	39 Old Hiam Avenue, Valley Park, MO 63088	
County	St. Louis County		
Pacifity Type SIGNATURE AND TIPLE OF	Yard Waste Composting operations under 20 acres AUTHORIZED INDIVIDUAL IN ACCORDANCE WITH 10 CSR 20-5.010(2)(C) DATE V27/12	PHONE NUMBER E-MAIL ADDRESS (Optional) 636-861-3344 ggs	celv@silcomcost.com
COMMENTS:	8 HESICOS I		This report covers the period of:
			1/01/16 to 3/31/16

PERMIT LIMITATIONS AND MONITORING REQUIREMENTS

ſ	Outfall #002		Final Permit Limitations			Menitoring Requirement			
	Parameter	Units	Daily Maximum	Weekly Average	Monthly Average	Prequency	Sample Type	Due Date	
Effluent (Note 1)	Flow	MGD	•			quarterly	24 hr estimate		
	Biochemical Oxygen Demand	mg/L	45		30	quarterly	gnab grab		
	Total Suspended Solids	mg/L			50	quarterly			
	рН	SU	••		••	quarterly	grab	October 28th of each year	
	MONTH OF JANUARY Precipitation	inches	•		•	daily	total		
	MONTH OF FEBRUARY Precipitation	inches				daily	total		
	MONTH OF MARCH Precipitation	inches	•		•	daily	total		
						- 7			
and to have a second									
Catalogue Comment					Ž.,				
None and a							From the second		
	MONITORING REPORTS SHALL BE SUBMI	TED QUARTERLY	THE FIRST	REPORT IS D	UE APRIL 28	2013.			

DMR SAMPLING SUMMARY

Daily Minimum	Daily Maximum	Weekly Average	Monthly Average	
		No. of Parties		
			7	
1				
	0.75		0.046774194	
	0.5		0.09137931	35
	1.5	j.	0.177419355	
		**		
		0.5	0.5	0.5 0.09137931

IF A VIOLATION OCCURRED, PLEASE ATTACH THE FOLLOWING: AN EXPLANATION OF POSSIBLE CAUSE, EXACT DATE OF NON-COMPLIANCE, DATE ANTICIPATED TO RETURN TO COMPLIANCE, AND WHAT STEPS YOUR OPERATION WILL TAKE TO PREVENT A REOCCURRENCE OF THE VIOLATION.

- * Monitoring requirement only.
- ** pH is measured in pH units and is not to be averaged. The pH is limited to the range of 6.5 9.0 pH units.
- *** Sample discharge at least once for the months of. Jan, Feb, Mar-1st Quarter, Apr, May, Jun-2nd Quarter, Jul, Aug, Sep-3rd Quarter, Oct, Nov, Dec-4th Quarter

Note 1 Monitor once/quarter during the first hour after a discharge from a rainfall event greater than 0.5 inch in a 24 hour period. Report as "no-discharge" if a discharge does not occur during the monitoring period. Samples shall be collected at all outfalls.

APR 2	27	200
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THIS DMR EXPIRES ON: November 29, 2017

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